

Instructions for On-Line Voucher Application

Direct questions to:

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For assistance with technical matters related to the on-line voucher application contact the Regional Training Center in your area.



Northern Arizona RTC (888) 394-1377

San Simon RTC (866) 830-5128

Tempe RTC (480) 965-3366



Tucson RTC (520) 225-4959

- Access the Arizona Department of Education's Common Logon Web Site <http://www.ade.az.gov/commonlogon/Login.asp?Mode=Logon>.
- Enter User Name and Password and Click "Continue".
Note: Contact Lori Damanti if you do not have a Common Logon Account.
- Click on **ESS Vouchers**.
Note: Contact Lori Damanti if **ESS Vouchers** is not included in the list of applications
- Click on "Select" and choose a school.

Vouchers		 Click Here for More Information	 Click Here for Feedback or Questions
Exceptional Student Services (00-12-02-000) Arizona State School for the Deaf and Blind - (00-12-02-027) Challenger			
Main Menu			
Current District / School			
District:	(00-12-02-000) Arizona State School for the Deaf and Blind		
School:	(00-12-02-027) Challenger		<input type="button" value="Select"/>
Menu Item	Description		
Claim Form	Enter/Edit a Claim for Payment		
Payment Report	Monthly Payment Report		
Quit	Close the ESS Voucher application.		

Claim Form: use this link to enter enrollment and/or withdrawal dates for approved students who have a change in enrollment. Note: all claim forms must be submitted by the 10th of every month in order to be processed that month. Any claims submitted after the 10th of the month will be processed the following month.

- Click on “Claim Form”.
- Click “ALL” to receive a full list of all students who have approvals, or search by voucher number, students name, or first letter of their last name.
- Click on the blue Voucher Number in front of the student’s name.

Vouchers		 Click Here for More Information	 Click Here for Feedback or Questions
Exceptional Student Services (00-12-02-000) Arizona State School for the Deaf and Blind - (00-12-02-023) DESERT VALLEYS REGION			
Claim Form		School Year: 2003	
Student			
Voucher No.:	I-03-02626		
Name (First / MI / Last):	Students	Name	
Date of Birth:	08/08/1996		
Disability:	HI -Hearing Impaired		
Claim			
Approval Date:	11/01/2002		
Enrollment Date:	<input type="text" value="11/01/2002"/>		
Withdrawal Date:	<input type="text"/>		
		<input type="button" value="Submit"/>	<input type="button" value="Cancel"/>

- Enter date that the student enrolled in educational services at your facility and/or the date that the student withdrew.
Note: Date format: MM/DD/YYYY
- Click “Submit”.
- Continue entering enrollment/withdrawal dates for each approved student with changes to their enrollment.

Payment Report: use this link to view and/or print your payment reports.

- Click on “Payment Report”.
- Click on “Print”.

Quit: Use this link to leave the ESS Voucher application and return to the Common Logon application access menu.

- Click on “Quit”.